### FORM PFS PERSONAL FINANCIAL STATEMENT **COVER SHEET** PAGE 1 PAGE# Filed in accordance with chapter 572 of the Government Code. 36 For filings required in 2019, covering calendar year ending December 31, 2018. ACCOUNT # Use FORM PFS--INSTRUCTION GUIDE when completing this form. 00081932 1 NAME TITLE; FIRST; MI **OFFICE USE ONLY** The Honorable Angela **ELECTRONICALLY FILED** NICKNAME; LAST; SUFFIX 07/01/2019 Paxton 2 ADDRESS ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP Receipt # PO Box 2878 HD / PM Amount McKinney, TX 75070 Date Processed (CHECK IF FILER'S HOME ADDRESS) AREA CODE PHONE NUMBER; EXTENSION **TELEPHONE** Date Imaged NUMBER REASON FOR FILIING STATEMENT CANDIDATE \_\_\_\_\_ (INDICATE OFFICE) ELECTED OFFICER State Senate District 8 (INDICATE OFFICE) APPOINTED OFFICER \_\_\_\_\_\_ (INDICATE AGENCY) EXECUTIVE HEAD \_\_\_\_\_ (INDICATE AGENCY) FORMER OR RETIRED JUDGE SITTING BY ASSIGNMENT STATE PARTY CHAIR \_\_\_\_\_\_ (INDICATE PARTY) OTHER \_\_\_\_\_ (INDICATE POSITION) **5** Family members whose financial activity you are reporting (see instructions). W. Kenneth Paxton Jr. **DEPENDENT CHILD** In Parts 1 through 18, you will disclose your financial activity during the preceding calendar year. In Parts 1 through 14, you are required to disclose not only your own financial activity, but also that of your spouse or a dependent child (see instructions).

### SOURCES OF OCCUPATIONAL INCOME PART 1A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. 1 INFORMATION RELATES TO FILER X SPOUSE DEPENDENT CHILD \_\_\_ 2 EMPLOYMENT NAME AND ADDRESS OF EMPLOYER / POSITION HELD X EMPLOYED BY ANOTHER (Check if Filer's Home Address) **EMPLOYER** State of Texas - Office of the Attorney General ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE PO Box 12548 Austin, TX 78701 **POSITION HELD** Attorney General NATURE OF OCCUPATION SELF-EMPLOYED INFORMATION RELATES TO X FILER SPOUSE DEPENDENT CHILD NAME AND ADDRESS OF EMPLOYER / POSITION HELD **EMPLOYMENT** EMPLOYED BY ANOTHER X (Check if Filer's Home Address) **EMPLOYER SELF** ZIP CODE ADDRESS / PO BOX; APT / SUITE #; CITY: STATE: POSITION HELD NATURE OF OCCUPATION X SELF-EMPLOYED Consulting

**STOCK** PART 2 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List each business entity in which you, your spouse, or a dependent child held or acquired stock during the calendar year and indicate the category of the number of shares held or acquired. If some or all of the stock was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more information, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. **BUSINESS ENTITY** NAME Servergy, Inc. STOCK HELD OR X SPOUSE FILER DEPENDENT CHILD **ACQUIRED BY** 3 NUMBER OF SHARES LESS THAN 100 100 TO 499 500 TO 999 1,000 TO 4,999 LESS THAN 10K X 10,000 OR MORE 4 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	GuideStone Funds Ag		NAME d Investor Class (GGBZ)	X)
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILD	)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	DFA Global Equity Po	rtfolio Institutional Class	NAME 5 (DGEIX)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499  X 10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
⊢					
E					
	MUTUAL FUND	DFA U.S. MicroCap Pe	rtfolio Institutional Clas	NAME SS (DFSCX)	
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	DFA U.S. MicroCap Po			)
	SHARES OF MUTUAL FUND		ortfolio Institutional Clas	ss (DFSCX)	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100	SPOUSE  X 100 TO 499	SS (DFSCX)	_
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	X FILER  LESS THAN 100  5,000 to 9,999	SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	SS (DFSCX)  DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	SS (DFSCX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	SS (DFSCX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  DFA Emerging Market	SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	SS (DFSCX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME  tional Class (DFEVX)	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  DFA Emerging Market  X FILER  LESS THAN 100	SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  S Value Portfolio Institut  SPOUSE  X 100 TO 499	SS (DFSCX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME tional Class (DFEVX)  DEPENDENT CHILE	1,000 TO 4,999  \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	DFA International Sma		NAME stitutional Class (DFISX)	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE	)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499	500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		I			
	MUTUAL FUND	DFA International Valu	ا ue Portfolio Institutional	NAME Class (DFIVX)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE	)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	X 500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
-					
E					
	MUTUAL FUND	DFA U.S. Small Cap V	talue Portfolio Institution	NAME nal Class (DFSVX)	
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	DFA U.S. Small Cap V			)
	SHARES OF MUTUAL FUND		/alue Portfolio Institution	nal Class (DFSVX)	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100	✓alue Portfolio Institution  SPOUSE  X 100 TO 499	nal Class (DFSVX)	_
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	X FILER  LESS THAN 100  5,000 to 9,999	✓alue Portfolio Institution  SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	nal Class (DFSVX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	✓alue Portfolio Institution  SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	nal Class (DFSVX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	✓alue Portfolio Institution  SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	nal Class (DFSVX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  DFA U.S. Large Cap V	/alue Portfolio Institution  SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	nal Class (DFSVX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME nal Class (DFLVX)	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  DFA U.S. Large Cap V  X FILER  LESS THAN 100	/alue Portfolio Institution  SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  /alue Portfolio Institution  SPOUSE  X 100 TO 499	DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME  TO ALL CLASS (DFLVX)  DEPENDENT CHILE	1,000 TO 4,999  \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	DFA Real Estate Secu	rities Portfolio Institutio	NAME nal Class (DFREX)	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE	)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	□ 500 то 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	DFA International Sma		NAME nstitutional Class (DISVX	<b>(</b> )
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE	)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499  10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		Ī			
	MUTUAL FUND	DFA U.S. Micro Cap P	r Portfolio Institutional Cla	NAME ss (DFSCX)	
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	DFA U.S. Micro Cap P			)
	SHARES OF MUTUAL FUND		Portfolio Institutional Cla	ss (DFSCX)	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER  LESS THAN 100	Portfolio Institutional Cla	SS (DFSCX)	_
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	FILER  LESS THAN 100  X 5,000 to 9,999	X SPOUSE	SS (DFSCX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND	FILER  LESS THAN 100  X 5,000 to 9,999  LESS THAN \$5,000	X SPOUSE	SS (DFSCX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	FILER  LESS THAN 100  X 5,000 to 9,999  LESS THAN \$5,000	X SPOUSE     100 TO 499   10,000 OR MORE   \$5,000 - \$9,999	SS (DFSCX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	FILER  LESS THAN 100  X 5,000 to 9,999  LESS THAN \$5,000  DFA Emerging Market	Portfolio Institutional Clar  X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	SS (DFSCX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME tional Class (DFEVX)	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	FILER  LESS THAN 100  X 5,000 to 9,999  LESS THAN \$5,000  DFA Emerging Market  FILER  LESS THAN 100	SPOUSE  SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  S Value Portfolio Institut  X SPOUSE  100 TO 499	SS (DFSCX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME tional Class (DFEVX)  DEPENDENT CHILE	1,000 TO 4,999  \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1 MUTUAL FUND						
HELD OR ACQUIRED BY	1	MUTUAL FUND	DFA International Sma			
MUTUAL FUND	2		FILER	X SPOUSE	DEPENDENT CHILD	·
NET LOSS	3				500 TO 999	X 1,000 TO 4,999
DFA Emerging Markets Portfolio Institutional Class (DFEMX)   SHARES OF MUTUAL FUND	4		LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
HELD OR ACQUIRED BY		MUTUAL FUND	DFA Emerging Market			
LESS THAN 100			FILER	X SPOUSE	DEPENDENT CHILD	)
IF SOLD					500 TO 999	X 1,000 TO 4,999
MUTUAL FUND    DFA U.S. Small Cap Value Portfolio Institutional Class (DFSVX)    SHARES OF MUTUAL FUND   FILER   X SPOUSE   DEPENDENT CHILD   DEPENDENT CHIL					\$10,000 - \$24,999	\$25,000OR MORE
DFA U.S. Small Cap Value Portfolio Institutional Class (DFSVX)  SHARES OF MUTUAL FUND	_	<u> </u>				
NUMBER OF SHARES OF MUTUAL FUND         LESS THAN 100	_					
LESS THAN 100		MUTUAL FUND	DFA U.S. Small Cap \			
IF SOLD		SHARES OF MUTUAL FUND		/alue Portfolio Institutior	nal Class (DFSVX)	)
MUTUAL FUND  NAME  DFA U.S. Large Cap Value Portfolio Institutional Class (DFLVX)  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  NUMBER OF SHARES OF MUTUAL FUND  LESS THAN 100  100 TO 499  5,000 to 9,999  10,000 OR MORE  S10,000 - \$24,999  \$25,000-OR MORE		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER  LESS THAN 100	/alue Portfolio Institution  X SPOUSE  100 TO 499	nal Class (DFSVX)	
DFA U.S. Large Cap Value Portfolio Institutional Class (DFLVX)  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  FILER X SPOUSE DEPENDENT CHILD  NUMBER OF SHARES OF MUTUAL FUND DEPENDENT CHILD		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER  LESS THAN 100	/alue Portfolio Institution  X SPOUSE  100 TO 499	nal Class (DFSVX)	
DFA U.S. Large Cap Value Portfolio Institutional Class (DFLVX)  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  FILER X SPOUSE DEPENDENT CHILD  NUMBER OF SHARES OF MUTUAL FUND DEPENDENT CHILD		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN	FILER  LESS THAN 100  5,000 to 9,999	/alue Portfolio Institution  X SPOUSE  100 TO 499  10,000 OR MORE	nal Class (DFSVX)  DEPENDENT CHILD  500 TO 999	X 1,000 TO 4,999
HELD OR ACQUIRED BY         ☐ FILER         ☒ SPOUSE         ☐ DEPENDENT CHILD           NUMBER OF SHARES OF MUTUAL FUND         ☐ LESS THAN 100         ☐ 100 TO 499         ☐ 500 TO 999         ☒ 1,000 TO 4,999           ☐ 5,000 to 9,999         ☐ 10,000 OR MORE    IF SOLD  INET GAIN  INET		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	FILER  LESS THAN 100  5,000 to 9,999	/alue Portfolio Institution  X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	nal Class (DFSVX)  DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999	X 1,000 TO 4,999
MUTUAL FUND		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	/alue Portfolio Institution  X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	nal Class (DFSVX)  DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999	X 1,000 TO 4,999
HESS THAN \$5,000  \$5,000  \$10,000  \$24,000  \$25,000  \$25,000  \$0,000		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  DFA U.S. Large Cap \	/alue Portfolio Institution  X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	nal Class (DFSVX)  DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999  NAME nal Class (DFLVX)	X 1,000 TO 4,999  \$25,000OR MORE
		SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  DFA U.S. Large Cap \ FILER  LESS THAN 100	/alue Portfolio Institution  X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  /alue Portfolio Institution  X SPOUSE  100 TO 499	DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999  NAME  TO DEPENDENT CHILD  DEPENDENT CHILD	X 1,000 TO 4,999  \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

ı					
1	MUTUAL FUND	DFA Real Estate Secu	rities Portfolio Institution	NAME nal Class (DFREX)	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	DFA International Valu	ا e Portfolio Institutional	NAME Class (DFIVX)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100  X 5,000 to 9,999	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
=					
	MUTUAL FUND		1	NAME	
	MUTUAL FUND	DFA International Sma		NAME nstitutional Class (DISVX	()
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	DFA International Sma			·
	SHARES OF MUTUAL FUND		ıll Cap Value Portfolio Ir	nstitutional Class (DISVX	·
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100	X SPOUSE	nstitutional Class (DISVX	)
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN	FILER  LESS THAN 100  X 5,000 to 9,999	X   SPOUSE     100 TO 499   10,000 OR MORE   \$5,000 - \$9,999	nstitutional Class (DISVX	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	FILER  LESS THAN 100  X 5,000 to 9,999  LESS THAN \$5,000	X   SPOUSE     100 TO 499   10,000 OR MORE   \$5,000 - \$9,999	nstitutional Class (DISVX DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	FILER  LESS THAN 100  X 5,000 to 9,999  LESS THAN \$5,000  DFA U.S. Large Comp	X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	nstitutional Class (DISVX DEPENDENT CHILD 500 TO 999 \$10,000 - \$24,999	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	FILER  LESS THAN 100  X 5,000 to 9,999  LESS THAN \$5,000  DFA U.S. Large Comp  X FILER  LESS THAN 100	Ill Cap Value Portfolio In  X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  any Portfolio (DFUSX)  SPOUSE  X 100 TO 499	DEPENDENT CHILD  \$10,000 - \$24,999  NAME  DEPENDENT CHILD	1,000 TO 4,999  \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	Vanguard PRIMECAP	Fund Admiral Shares (	NAME VPMAX)	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILE	)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100  5,000 to 9,999	100 TO 499 10,000 OR MORE	☐ 500 TO 999	X 1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	Vanguard Total Stock	r Market Index Fund Adn	NAME niral Shares (VTSAX)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILE	)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100  5,000 to 9,999	100 TO 499 10,000 OR MORE	☐ 500 TO 999	X 1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
_					
	MUTUAL FUND	DEA Empanion Made		NAME	
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	DFA Emerging Marke	s Portfolio Institutional (		)
	SHARES OF MUTUAL FUND	<u> </u>	s Portfolio Institutional (	Class (DFEMX)	D
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER  LESS THAN 100	SPOUSE  X 100 TO 499	Class (DFEMX)  DEPENDENT CHILE	<u> </u>
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN	X FILER	SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	Class (DFEMX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	X FILER	SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	Class (DFEMX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  DFA Global Equity Po	SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	Class (DFEMX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME  (DGEIX)	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	X FILER   LESS THAN 100   5,000 to 9,999   LESS THAN \$5,000   DFA Global Equity Po   X FILER   LESS THAN 100   LESS THAN 100   Control   Control	SPOUSE  SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  rtfolio Institutional Class  SPOUSE  100 TO 499	Class (DFEMX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME COGEIX)  DEPENDENT CHILE	1,000 TO 4,999  \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	DFA U.S. Large Comp	nany Portfolio (DFUSX)	NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499	500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	Vanguard Energy Fun	ا d Admiral Shares (VGE	NAME LX)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		ì			
	MUTUAL FUND	Vanguard Federal Moi	ney Market Fund Invest	NAME or Shares (VMFXX)	
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	Vanguard Federal Moi			)
	SHARES OF MUTUAL FUND	<u> </u>	ney Market Fund Invest	or Shares (VMFXX)	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100	ney Market Fund Invest  X SPOUSE  100 TO 499	or Shares (VMFXX)	_
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	X FILER  LESS THAN 100  5,000 to 9,999	X   SPOUSE     100 TO 499     X   10,000 OR MORE     \$5,000 - \$9,999	or Shares (VMFXX)  DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	X   SPOUSE     100 TO 499     X   10,000 OR MORE     \$5,000 - \$9,999	or Shares (VMFXX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	X SPOUSE     100 TO 499     X 10,000 OR MORE     \$5,000 - \$9,999	or Shares (VMFXX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  Vanguard Health Care	ney Market Fund Invest  X SPOUSE  100 TO 499  X 10,000 OR MORE  \$5,000 - \$9,999	or Shares (VMFXX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME VGHAX)	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  Vanguard Health Care  X FILER  LESS THAN 100	mey Market Fund Invest  X SPOUSE  100 TO 499  X 10,000 OR MORE  \$5,000 - \$9,999  Fund Admiral Shares ( X SPOUSE  100 TO 499	or Shares (VMFXX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME VGHAX)  DEPENDENT CHILE	1,000 TO 4,999  \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	Vanguard Mid-Cap Inc	ا lex Fund Admiral Share	NAME s (VIMAX)	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	Vanguard REIT Index	۱ Fund Admiral Shares (۱	NAME /GSLX)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100 5,000 to 9,999	X 100 TO 499  10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	Vanguaged Casall Can I		NAME	
	<u> </u>	Vanguard Small-Cap I	ndex Fund Admiral Sha		)
	MUTUAL FUND  SHARES OF MUTUAL FUND		ndex Fund Admiral Sha	res (VSMAX)	X 1,000 TO 4,999
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	X FILER LESS THAN 100	x SPOUSE	res (VSMAX)	<u></u>
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	X SPOUSE   100 TO 499   10,000 OR MORE   \$5,000 - \$9,999	res (VSMAX)  DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999	X 1,000 TO 4,999
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	X SPOUSE   100 TO 499   10,000 OR MORE   \$5,000 - \$9,999	res (VSMAX)  DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999	X 1,000 TO 4,999  \$25,000OR MORE
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  GuideStone Funds Eq	ndex Fund Admiral Sha  X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	res (VSMAX)  DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999  NAME  r Class (GEQZX)	X 1,000 TO 4,999  \$25,000OR MORE
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  GuideStone Funds Eq  X FILER  LESS THAN 100	mdex Fund Admiral Shank  X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  uity Index Fund Investo  SPOUSE  100 TO 499	TES (VSMAX)  DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999  NAME T Class (GEQZX)  DEPENDENT CHILD	X 1,000 TO 4,999  \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

ı					
1	MUTUAL FUND	GuideStone Funds Gr	owth Equity Fund Invest	NAME tor Class (GGEZX)	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE	)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	GuideStone Funds Va	ا lue Equity Fund Investo	NAME or Class (GVEZX)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	X FILER	SPOUSE	DEPENDENT CHILE	)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499 10,000 OR MORE	500 TO 999	X 1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
F	MUTUAL FUND		1	NAME	
	MUTUAL FUND	GuideStone Funds Sm	nall Cap Equity Fund Inv		
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	GuideStone Funds Sm  X FILER			)
	SHARES OF MUTUAL FUND		nall Cap Equity Fund Inv	vestor Class (GSCZX)	X 1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	X FILER LESS THAN 100	nall Cap Equity Fund Inv	vestor Class (GSCZX)	<u> </u>
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	nall Cap Equity Fund Inv SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	vestor Class (GSCZX)  DEPENDENT CHILE  500 TO 999	X 1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	nall Cap Equity Fund Inv SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	vestor Class (GSCZX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	X 1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  American Beacon Zeb	SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	vestor Class (GSCZX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME  Ind Investor Class (AZSF	X 1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	X FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  American Beacon Zeb  FILER  LESS THAN 100	SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  ra Small Cap Equity Fu  X SPOUSE  X 100 TO 499	vestor Class (GSCZX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME  IN DEPENDENT CHILE	X 1,000 TO 4,999

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

_					
1	MUTUAL FUND	Buffalo Discovery Fun		NAME	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	)
3	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	100 TO 499	X 500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
		ı			
	MUTUAL FUND	Conestoga Small Cap	r Fund Investors Class (	NAME CCASX)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499  10,000 OR MORE	500 TO 999	1,000 TO 4,999
	IF SOLD ☐ NET GAIN ☐ NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	Driehaus Micro Cap G		NAME	
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	Driehaus Micro Cap G ☐ FILER		NAME  DEPENDENT CHILE	)
	SHARES OF MUTUAL FUND		rowth Fund (DMCRX)		1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER  LESS THAN 100	x SPOUSE x 100 TO 499	DEPENDENT CHILD	_
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	FILER  LESS THAN 100  5,000 to 9,999	x SPOUSE  x 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	DEPENDENT CHILD 500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	x SPOUSE  x 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	DEPENDENT CHILE 500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	x SPOUSE  x 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	DEPENDENT CHILE 500 TO 999  \$10,000 - \$24,999	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  Elenmede Large Cap	rowth Fund (DMCRX)  X SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999  NAME  X)	1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  Elenmede Large Cap  FILER  LESS THAN 100	x SPOUSE  X SPOUSE  X 100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  Growth Portfolio (GTLL)  X SPOUSE  100 TO 499	DEPENDENT CHILD  500 TO 999  \$10,000 - \$24,999  NAME  X)  DEPENDENT CHILD	1,000 TO 4,999  \$25,000OR MORE

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS-INSTRUCTION GUIDE.

1	MUTUAL FUND	Janus Henderson Glol	ا عدد المراجع المراجعة	NAME Class T (JAGLX)	
2	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILE	)
3	NUMBER OF SHARES OF MUTUAL FUND	X LESS THAN 100 5,000 to 9,999	100 TO 499 10,000 OR MORE	500 TO 999	1,000 TO 4,999
4	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
	MUTUAL FUND	Janus Henderson Sma	n All Cap Value Fund Clas	NAME ss T (JSCVX)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	)
	NUMBER OF SHARES OF MUTUAL FUND	LESS THAN 100	X 100 TO 499 10,000 OR MORE	☐ 500 TO 999	1,000 TO 4,999
	IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
L					
	MUTUAL FUND	Janus Henderson U.S	۱ . Managed Volatility Fur	NAME nd Class T (JRSTX)	
	MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY	Janus Henderson U.S			)
	SHARES OF MUTUAL FUND		. Managed Volatility Fur	nd Class T (JRSTX)	X 1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY NUMBER OF SHARES OF	FILER LESS THAN 100	Managed Volatility Fur  X SPOUSE  100 TO 499	nd Class T (JRSTX)	
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	Managed Volatility Fur  X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	nd Class T (JRSTX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	X 1,000 TO 4,999
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000	Managed Volatility Fur    X   SPOUSE     100 TO 499     10,000 OR MORE     \$5,000 - \$9,999     10,000 OR MORE     10,000 OR MORE     10,000 OR MORE   10,000 OR	nd Class T (JRSTX)  DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999	X 1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  Parnassus Core Equity	Managed Volatility Fur  SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999	DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME S (PRBLX)	X 1,000 TO 4,999  \$25,000OR MORE
	SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF MUTUAL FUND  IF SOLD NET GAIN NET LOSS  MUTUAL FUND  SHARES OF MUTUAL FUND HELD OR ACQUIRED BY  NUMBER OF SHARES OF	FILER  LESS THAN 100  5,000 to 9,999  LESS THAN \$5,000  Parnassus Core Equity  FILER  LESS THAN 100	Managed Volatility Fur  X SPOUSE  100 TO 499  10,000 OR MORE  \$5,000 - \$9,999  Fund - Investor Share  X SPOUSE  X 100 TO 499	DEPENDENT CHILE  500 TO 999  \$10,000 - \$24,999  NAME \$ (PRBLX)  DEPENDENT CHILE	X 1,000 TO 4,999  \$25,000OR MORE

**MUTUAL FUNDS** PART 4 If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. List each mutual fund and the number of shares in that mutual fund that you, your spouse, or a dependent child held or acquired during the calendar year and indicate the category of the number of shares of mutual funds held or acquired. If some or all of the shares of a mutual fund were sold, also indicate the category of the amount of the net gain or loss realized from the sale. For more nformation, see FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. MUTUAL FUND NAME Vanguard Institutional Index Fund Institutional Plus Shares (VIIIX) SHARES OF MUTUAL FUND X SPOUSE HELD OR ACQUIRED BY FILER DEPENDENT CHILD NUMBER OF SHARES OF MUTUAL FUND LESS THAN 100 X 100 TO 499 500 TO 999 1,000 TO 4,999 5,000 to 9,999 10,000 OR MORE 4 IF SOLD NET GAIN LESS THAN \$5,000 \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000--OR MORE NET LOSS

### **INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS**

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties, and rents during the calendar year and indicate the category of the amount of the income. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 SOURCE OF INCOME	NAME AND ADDRESS
X Publicly held corporation	XTO Energy  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
2 RECEIVED BY	X FILER X SPOUSE DEPENDENT CHILD
3 AMOUNT	\$500 - \$4,999 X \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
Publicly held corporation	Bank of the Ozarks  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  7197 Lebanon Road
	Frisco, TX 75034
RECEIVED BY	FILER X SPOUSE DEPENDENT CHILD
AMOUNT	\$500 - \$4,999 X \$5,000 - \$9,999 S10,000 - \$24,999 \$25,000OR MORE
SOURCE OF INCOME	NAME AND ADDRESS
SOURCE OF INCOME  Publicly held corporation	
	NAME AND ADDRESS  Victoria Energy  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	NAME AND ADDRESS  Victoria Energy  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  121 S Main Street
Publicly held corporation	NAME AND ADDRESS  Victoria Energy  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  121 S Main Street  Farmersville, TX 75442
Publicly held corporation  RECEIVED BY	NAME AND ADDRESS  Victoria Energy  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  121 S Main Street  Farmersville, TX 75442     FILER   X SPOUSE   DEPENDENT CHILD
Publicly held corporation  RECEIVED BY  AMOUNT	NAME AND ADDRESS  Victoria Energy  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  121 S Main Street  Farmersville, TX 75442  FILER X SPOUSE DEPENDENT CHILD  \$500 - \$4,999 X \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE  NAME AND ADDRESS
Publicly held corporation  RECEIVED BY  AMOUNT  SOURCE OF INCOME	NAME AND ADDRESS  Victoria Energy  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  121 S Main Street  Farmersville, TX 75442  FILER X SPOUSE DEPENDENT CHILD  \$500 - \$4,999 X \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE  NAME AND ADDRESS  Vanguard
Publicly held corporation  RECEIVED BY  AMOUNT	NAME AND ADDRESS  Victoria Energy  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  121 S Main Street  Farmersville, TX 75442  FILER X SPOUSE DEPENDENT CHILD  \$500 - \$4,999 X \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE  NAME AND ADDRESS
Publicly held corporation  RECEIVED BY  AMOUNT  SOURCE OF INCOME	NAME AND ADDRESS  Victoria Energy ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  121 S Main Street  Farmersville, TX 75442  FILER X SPOUSE DEPENDENT CHILD S500 - \$4,999 X \$5,000 - \$9,999 \$10,000 - \$24,999 \$25,000OR MORE  NAME AND ADDRESS  Vanguard ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
Publicly held corporation  RECEIVED BY  AMOUNT  SOURCE OF INCOME	NAME AND ADDRESS  Victoria Energy  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  121 S Main Street  Farmersville, TX 75442  FILER  X SPOUSE  DEPENDENT CHILD  \$500 - \$4,999  X \$5,000 - \$9,999  \$10,000 - \$24,999  \$25,000OR MORE  NAME AND ADDRESS  Vanguard  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  PO Box 2600
Publicly held corporation  RECEIVED BY  AMOUNT  SOURCE OF INCOME  Publicly held corporation	NAME AND ADDRESS  Victoria Energy  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  121 S Main Street  Farmersville, TX 75442  FILER  X SPOUSE  DEPENDENT CHILD  S500 - \$4,999  X \$5,000 - \$9,999  \$10,000 - \$24,999  \$25,000-OR MORE  NAME AND ADDRESS  Vanguard  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  PO Box 2600  Valley Forge, PA 79482-2600

### **INCOME FROM INTEREST, DIVIDENDS, ROYALTIES & RENTS**

PART 5

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List each source of income you, your spouse, or a dependent child received in excess of \$500 that was derived from interest, dividends, royalties,

	INSTRUCTION GUIDE.	ar and indicate the catego	y of the amount of the incom	ie. For more information, s	see FORM PFS
	When reporting information abou which the child is listed on the Co		ity, indicate the child about w	hom you are reporting by	providing the number under
1	SOURCE OF INCOME		NAME A	AND ADDRESS	
	Publicly held corporation	Watchguard Inc ADDRESS 415 E Exchange Pk	/ PO BOX; APT / SUITE	#; CITY; STAT	TE; ZIP CODE
		Allen, TX 75002			
2	RECEIVED BY	X FILER	X SPOUSE	DEPENDENT CH	ILD
3	AMOUNT	\$500 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE

#### PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Alliance Bank Centra	al Texas		
2 LIABILITY OF	FILER	X SPOUSE	DEPENDENT CHIL	D
3 GUARANTOR	NONE			
4 AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Independent Bank			
LIABILITY OF	FILER	X SPOUSE	DEPENDENT CHIL	D
GUARANTOR	NONE			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Loancare LLC			
LIABILITY OF	X FILER	X SPOUSE	DEPENDENT CHIL	D
GUARANTOR	NONE			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Cornerstone Home L	_ending		
LIABILITY OF	X FILER	X SPOUSE	DEPENDENT CHIL	D
GUARANTOR	NONE			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE

#### PERSONAL NOTES AND LEASE AGREEMENTS

PART 6

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify each guarantor of a loan and each person or financial institution to whom you, your spouse, or a dependent child had a total financial liability of more than \$1,000 in the form of a personal note or notes or lease agreement at any time during the calendar year and indicate the category of the amount of the liability. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under

which the child is listed on the Co	over Sheet.	y, maicate the crima about v	whom you are reporting by pre	oviding the number under
PERSON OR INSTITUTION     HOLDING NOTE OR     LEASE AGREEMENT	Daimler Title Compa	ny		
2 LIABILITY OF	FILER	X SPOUSE	DEPENDENT CHILD	)
3 GUARANTOR	NONE			
4 AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE
PERSON OR INSTITUTION HOLDING NOTE OR LEASE AGREEMENT	Texan Bank			
LIABILITY OF	X FILER	X SPOUSE	DEPENDENT CHILD	)
GUARANTOR	NONE			
AMOUNT	\$1,000 - \$4,999	\$5,000 - \$9,999	\$10,000 - \$24,999	X \$25,000OR MORE

#### **INTERESTS IN REAL PROPERTY**

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD OR ACQUIRED BY       ☑ FILER       ☑ SPOUSE       ☐ DEPENDENT CHILD         2 STREET ADDRESS       STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE         ☐ NOT AVAILABLE       ☑ CHECK IF PILERS         ☑ LOTS HOME ADDRESS       1.00000 lots         ☐ ACRES       1.00000 lots         6 IF SOLD       NET LOSS         ☐ NET LOSS       ☐ LESS THAN \$5,000       ☐ \$5,000 - \$9,999       ☐ \$10,0000 - \$24,999       ☐ \$25,000 - OR MORE         HELD OR ACQUIRED BY       ☑ FILER       ☑ SPOUSE       ☐ DEPENDENT CHILD       ☐         STREET ADDRESS       STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE       ☐         ☐ NOT AVAILABLE       ☐ (Redacted for security purposes on request of TX DPS)       ☐         ☐ LOTS       ☐ ACRES       Austin, TX 78703         NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED       ☐         ☐ LOTS       ☐ ACRES       INTRUCEASE         ☐ SEVERED MINIERAL INTEREST       ☐         ☐ NOT APPLICABLE (SEVERED MINIERAL INTEREST)       ☐         ☐ NOT APPLICABLE (SEVERED MINIERAL INTEREST)       ☐         ☐ NET LOSS       ☐         ☐ NET GAIN INTEREST       ☐         ☐ NOT APPLICABLE (SEVERED MINIERAL INTEREST)       ☐         ☐ NET GAIN INTEREST       ☐					
NOT AVAILABLE   CHECK IF FILERS	1 HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	
1.00000 lots   Collin	NOT AVAILABLE  X CHECK IF FILER'S		STREET ADDRESS, INCLU	JDING CITY, COUNTY, AND STA	TE
RETAINING AN INTEREST  NOT APPLICABLE (SEVERED MINERAL INTEREST)    IF SOLD	X LOTS	1.00000 lots	ER OF LOTS OR ACRES A	ND NAME OF COUNTY WHERE I	LOCATED
HELD OR ACQUIRED BY  X FILER  X SPOUSE  DEPENDENT CHILD  STREET ADDRESS  NOT AVAILABLE  CHECK IF FILERS HOME ADDRESS  Austin, TX 78703  DESCRIPTION  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED  0.00000 lots Travis  NAMES OF PERSONS RETAINING AN INTEREST  NOT AVAILABLE  (SEVERED MINERAL  NAMES OF PERSONS RETAINING AN INTEREST  NOT APPLICABLE  (SEVERED MINERAL  INTEREST)  NET GAIN  LESS THAN \$5,000  \$5,000 - \$9,999  \$10,000 - \$24,999  \$25,000 - OR MORE	RETAINING AN INTEREST  X NOT APPLICABLE (SEVERED MINERAL				
STREET ADDRESS  STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  DESCRIPTION  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED  0.00000 lots  Travis  NAMES OF PERSONS RETAINING AN INTEREST  NOT APPLICABLE (SEVERED MINERAL INTEREST)  NET GAIN  LESS THAN \$5,000	LI NET GAIN	LESS THAN \$5,0	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
NOT AVAILABLE   CHECK IF FILER'S   Austin, TX 78703					
NAMES OF PERSONS RETAINING AN INTEREST   Loancare, LLC     NOT APPLICABLE (SEVERED MINERAL INTEREST)   NOT APPLICABLE (SEVERED MINERAL INTEREST)     IF SOLD   NET GAIN   NET	HELD OR ACQUIRED BY	X FILER	X SPOUSE	DEPENDENT CHILD	
RETAINING AN INTEREST  NOT APPLICABLE (SEVERED MINERAL INTEREST)  IF SOLD  NET GAIN  IF SOLD  NET GAIN  LESS THAN \$5,000    \$5,000 - \$9,999	STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S	(Redacted for secu	STREET ADDRESS, INCLU	JDING CITY, COUNTY, AND STA	
☐	STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS	(Redacted for secu Austin, TX 78703 NUMBI 0.000000 lots	STREET ADDRESS, INCLU	UDING CITY, COUNTY, AND STATOF TX DPS)	TE
	STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS ACRES  NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL	(Redacted for secu Austin, TX 78703 NUMB 0.00000 lots Travis	STREET ADDRESS, INCLU	UDING CITY, COUNTY, AND STATOF TX DPS)	TE

#### **INTERESTS IN REAL PROPERTY**

PART 7A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in real property held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

1 HELD OR ACQUIRED BY	X FILER X SPOUSE DEPENDENT CHILD	
2 STREET ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE	
NOT AVAILABLE	(Redacted for security purposes on request of TX DPS)	
CHECK IF FILER'S HOME ADDRESS	College Station, TX 77845-6162	
3 DESCRIPTION	NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED	
X LOTS	0.14800 lots	
ACRES	Brazos	
4 NAMES OF PERSONS	Comparators Horse Londing	
RETAINING AN INTEREST	Cornerstone Home Lending	
NOT APPLICABLE		
(SEVERED MINERAL INTEREST)		
5 IF SOLD NET GAIN	LESS THAN \$5,000  \$5,000 - \$9,999  \$10,000 - \$24,999  \$25,000OR MOI	RE
☐ NET LOSS		
HELD OR ACQUIRED BY	X FILER X SPOUSE DEPENDENT CHILD	
HELD OR ACQUIRED BY STREET ADDRESS	X FILER X SPOUSE DEPENDENT CHILD  STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE	
STREET ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE (Redacted for security purposes on request of TX DPS)  Austin, TX 78703	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS ACRES	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED  1.00000 lots  Travis	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED 1.00000 lots	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS ACRES  NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED  1.00000 lots  Travis	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS ACRES  NAMES OF PERSONS RETAINING AN INTEREST	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED  1.00000 lots  Travis	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS ACRES  NAMES OF PERSONS RETAINING AN INTEREST  NOT APPLICABLE (SEVERED MINERAL	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED  1.00000 lots  Travis	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS ACRES  NAMES OF PERSONS RETAINING AN INTEREST  NOT APPLICABLE (SEVERED MINERAL	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED  1.00000 lots  Travis	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS ACRES  NAMES OF PERSONS RETAINING AN INTEREST  NOT APPLICABLE (SEVERED MINERAL	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED  1.00000 lots  Travis	
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS ACRES  NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)  IF SOLD  NET GAIN	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED  1.00000 lots  Travis  Texan Bank	RE
STREET ADDRESS  NOT AVAILABLE CHECK IF FILER'S HOME ADDRESS  DESCRIPTION X LOTS ACRES  NAMES OF PERSONS RETAINING AN INTEREST NOT APPLICABLE (SEVERED MINERAL INTEREST)	STREET ADDRESS, INCLUDING CITY, COUNTY, AND STATE  (Redacted for security purposes on request of TX DPS)  Austin, TX 78703  NUMBER OF LOTS OR ACRES AND NAME OF COUNTY WHERE LOCATED  1.00000 lots  Travis	RE

#### **INTEREST IN BUSINESS ENTITIES**

PART 7B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all beneficial interests in business entities held or acquired by you, your spouse, or a dependent child during the calendar year. If the interest was sold, also indicate the category of the amount of the net gain or loss realized from the sale. For an explanation of "beneficial interest" and other specific directions for completing this section, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under

which the child is listed on the Co	Wei Sheet.			
1 HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	)
2 DESCRIPTION	Premier Vertical Prope	X (Check if	ND ADDRESS Filer's Home Address)	
3 IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	·
DESCRIPTION	RSKA Holdings LLC		ND ADDRESS Filer's Home Address)	
IF SOLD NET GAIN NET LOSS	LESS THAN \$5,000	\$5,000 - \$9,999	\$10,000 - \$24,999	\$25,000OR MORE
HELD OR ACQUIRED BY	FILER	X SPOUSE	DEPENDENT CHILD	)
HELD OR ACQUIRED BY  DESCRIPTION	FILER  W. Kenneth Paxton, J	NAME A	DEPENDENT CHILD  ND ADDRESS  Filer's Home Address)	)
	W. Kenneth Paxton, J	NAME A	ND ADDRESS	\$25,000OR MORE
DESCRIPTION  IF SOLD NET GAIN	W. Kenneth Paxton, J	NAME A  X (Check if	ND ADDRESS Filer's Home Address)	\$25,000OR MORE
DESCRIPTION  IF SOLD NET GAIN NET LOSS	W. Kenneth Paxton, J. LESS THAN \$5,000	NAME A  X (Check if r. PLLC  \$5,000 - \$9,999  SPOUSE  NAME A	ND ADDRESS Filer's Home Address)  \$10,000 - \$24,999	\$25,000OR MORE

GIFTS PART 8

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify any person or organization that has given a gift worth more than \$250 to you, your spouse, or a dependent child, and describe the gift. The description of a gift of cash or a cash equivalent, such as a negotiable instrument or gift certificate must include a statement of the value of the gift. Do not include: 1) expenditures required to be reported by a person required to be registered as a lobbyist under chapter 305 of the Government Code; 2) political contributions reported as required by law; or 3) gifts given by a person related to the recipient within the second degree by consanguinity or affinity. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 DONOR	NAME AND ADDRESS
	Boenker, Al
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	600 Lake Worth Blvd
	OUD LAKE WORLT DIVU
	Fort Worth, TV 7612F
	Fort Worth, TX 76135
2 RECIPIENT	
	FILER X SPOUSE DEPENDENT CHILD
3 DESCRIPTION OF GIFT	Hunting trip
DONOR	NAME AND ADDRESS
	Kennedy, Dean
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	5601 Granite Parkway, Suite 600
	Diana TV 75024
	Plano, TX 75024
RECIPIENT	
	FILER X SPOUSE DEPENDENT CHILD
DESCRIPTION OF GIFT	Fishing trip
DONOR	NAME AND ADDRESS
	Benavides, Carlos
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	1116 Calle del Norte
	1110 Cane del Note
	Laredo, TX 78041
	Laieuo, 17 70041
RECIPIENT	
	FILER X SPOUSE DEPENDENT CHILD
DESCRIPTION OF GIFT	Hunting trip

GIFTS PART 8

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify any person or organization that has given a gift worth more than \$250 to you, your spouse, or a dependent child, and describe the gift. The description of a gift of cash or a cash equivalent, such as a negotiable instrument or gift certificate must include a statement of the value of the gift. Do not include: 1) expenditures required to be reported by a person required to be registered as a lobbyist under chapter 305 of the Government Code; 2) political contributions reported as required by law; or 3) gifts given by a person related to the recipient within the second degree by consanguinity or affinity. For more information, see FORM PFS--INSTRUCTION GUIDE.

1 DONOR	NAME AND ADDRESS Morgan, Bob (Dr.)
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 5916 Steuben Court
	Dallas, TX 75248
2 RECIPIENT	X FILER X SPOUSE DEPENDENT CHILD
3 DESCRIPTION OF GIFT	Airplane trip
DONOR	NAME AND ADDRESS
DONOR	NAME AND ADDRESS  Dyer, Don  ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  1304 Oltorf Street W
	Austin, TX 78704
RECIPIENT	FILER X SPOUSE DEPENDENT CHILD
DESCRIPTION OF GIFT	Airplane trip and lodging
DOMOR	NAME AND ADDRESS
DONOR	NAME AND ADDRESS  Fallon, Patrick (The Honorable)
	ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE  2416 Griffith Park
	Prosper, TX 75078
RECIPIENT	X FILER X SPOUSE DEPENDENT CHILD
DESCRIPTION OF GIFT	Lodging

**BLIND TRUSTS** PART 10A If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report. Identify each blind trust that complies with section 572.023(c) of the Government Code. See FORM PFS--INSTRUCTION GUIDE. When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which the child is listed on the Cover Sheet. NAME OF TRUST The Esther Blind Trust 2 TRUSTEE NAME AND ADDRESS Loper III, Charles A. ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE 9300 Wade Blvd Ste 100 Frisco, TX 75035 3 BENEFICIARY X FILER X SPOUSE DEPENDENT CHILD \_\_\_\_\_ 4 FAIR MARKET VALUE LESS THAN \$5,000 \$5,000 - \$9,999 X \$25,000--OR MORE \$10,000 - \$24,999 5 DATE CREATED 04/12/2015

#### TRUSTEE STATEMENT

PART 10B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

1 NAME OF TRUST	The Esther Blind Trust
2 TRUSTEE NAME	Loper III, Charles A.
3 FILER ON WHOSE BEHALF STATEMENT IS BEING FILED	NAME Paxton, Angela (The Honorable)
4 TOUGHTEE OTATEMENT	

4 TRUSTEE STATEMENT

I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.

Trustee Signature

#### #xA7 572.023. Contents of Financial Statement in General

- (b) The account of financial activity consists of:
  - (8) identification of the source and the category of the amount of all income received as beneficiary of a trust, other than a blind trust that complies with Subsection (c), and identification of each trust asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500;
  - (14) identification of each blind trust that complies with Subsection (c), including:
    - (A) the category of the fair market value of the trust;
    - (B) the date the trust was created;
    - (C) the name and address of the trustee; and
    - (D) a statement signed by the trustee, under penalty of perjury, stating that:
      - (i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and
      - (ii) to the best of the trustee#xCABCs knowledge, the trust complies with this section.
- (c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:
  - (1) the trustee:
    - (A) is a disinterested party;
    - (B) is not the individual;
    - (C) is not required to register as a lobbyist under Chapter 305;
    - (D) is not a public officer or public employee; and
    - (E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and
  - (2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.
- (d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual#xCABCs most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.

### **OWNERSHIP OF BUSINESS ASSOCIATIONS**

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

the child is listed on the Cover s	Meet.
1 BUSINESS ASSOCIATION	NAME AND ADDRESS  X (Check If Filer's Home Address)  Premier Vertical Properties LP
2 BUSINESS TYPE	Corporation X Limited Partnership Profesional Association Limited Liability Partnership Joint Venture Partnership Professional Corporation Other
3 HELD, ACQUIRED, OR SOLD BY	FILER X SPOUSE DEPENDENT CHILD
1 BUSINESS ASSOCIATION	NAME AND ADDRESS  X (Check If Filer's Home Address)  RSKA Holdings LLC
2 BUSINESS TYPE	Corporation Limited Partnership Profesional Association Firm Limited Liability Partnership Joint Venture Partnership Professional Corporation X Other
3 HELD, ACQUIRED, OR SOLD BY	FILER X SPOUSE DEPENDENT CHILD
1 BUSINESS ASSOCIATION	NAME AND ADDRESS  X (Check If Filer's Home Address)  W Kenneth Paxton Jr PLLC
2 BUSINESS TYPE	Corporation Limited Partnership Profesional Association  Firm Limited Liability Partnership Joint Venture  Partnership Professional Corporation X Other
3 HELD, ACQUIRED, OR SOLD BY	FILER X SPOUSE DEPENDENT CHILD

### **OWNERSHIP OF BUSINESS ASSOCIATIONS**

PART 11A

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 5 percent or more of the outstanding ownership. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information abo the child is listed on the Cover S	out a dependent child's activity, indicate the child about whom you are reporting by providing the number under which Sheet.
1 BUSINESS ASSOCIATION	NAME AND ADDRESS  X (Check If Filer's Home Address)  TAMKA LLC
2 BUSINESS TYPE	Corporation Limited Partnership Profesional Association  Firm Limited Liability Partnership Joint Venture  Partnership Professional Corporation X Other
3 HELD, ACQUIRED, OR SOLD BY	X FILER SPOUSE DEPENDENT CHILD

### **ASSETS OF BUSINESS ASSOCIATIONS**

PART 11B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

	the child is listed on the Cover S	at a dependent child's activity, indicate the child about whom you are reporting by providing the number under which heet.
1	BUSINESS ASSOCIATION	NAME AND ADDRESS  X (Check If Filer's Home Address)  Premier Vertical Properties LP
2	BUSINESS TYPE	Limited Partnership
3	HELD, ACQUIRED, OR SOLD BY	FILER X SPOUSE DEPENDENT CHILD
4	ASSETS	DESCRIPTION CATEGORY  Cell tower LESS THAN \$5,000 \$5,000 - \$9,999  \$10,000 - \$24,999 X \$25,000 OR MORE
1	BUSINESS ASSOCIATION	NAME AND ADDRESS  X (Check If Filer's Home Address)  RSKA Holdings LLC
2	BUSINESS TYPE	Other Business Association
3	HELD, ACQUIRED, OR SOLD BY	FILER X SPOUSE DEPENDENT CHILD
4	ASSETS	DESCRIPTION CATEGORY  1% interest in Premier Vertical Properties LP    X LESS THAN \$5,000   \$5,000 - \$9,999   \$10,000 - \$24,999   \$25,000 OR MORE

### **ASSETS OF BUSINESS ASSOCIATIONS**

PART 11B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all assets of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which

	the child is listed on the Cover S		, maleate the erma about wi	ioni you are reporting by previo	ang the number under which
1	BUSINESS ASSOCIATION	W Kenneth Paxton Jr PL	X (Check If Fil	ND ADDRESS er's Home Address)	
2	BUSINESS TYPE	Other Business Associat	tion		
3	HELD, ACQUIRED, OR SOLD BY	FILER	X SPOUSE	DEPENDENT CHILD _	
4	ASSETS	none	RIPTION	CATE  X LESS THAN \$5,000  \$10,000 - \$24,999	EGORY  \$5,000 - \$9,999  \$25,000 OR MORE
1	BUSINESS ASSOCIATION	TAMKA LLC		ND ADDRESS er's Home Address)	
2	BUSINESS TYPE	Other Business Associat	tion		
3	HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD _	
4	ASSETS	Print materials	RIPTION	CATE    X LESS THAN \$5,000	\$5,000 - \$9,999

### LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11C

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

the shild she

	the child is listed on the Cover S		y, indicate the child about wh	nom you are reporting by provi	ding the number under which
1	BUSINESS ASSOCIATION	Premier Vertical Propert	X (Check If File	ND ADDRESS er's Home Address)	
2	BUSINESS TYPE				
		Limited Partnership			
3	HELD, ACQUIRED, OR SOLD BY	FILER	X SPOUSE	DEPENDENT CHILD _	
4	LIABILITIES	DESC ground lease	RIPTION	CATE LESS THAN \$5,000 \$10,000 - \$24,999	EGORY    X
1	BUSINESS ASSOCIATION	RSKA Holdings LLC		ND ADDRESS er's Home Address)	
2	BUSINESS TYPE	Other Business Associa	ution		
3	HELD, ACQUIRED, OR SOLD BY	FILER	X SPOUSE	DEPENDENT CHILD _	
4	LIABILITIES	none	RIPTION	CATE    X LESS THAN \$5,000	EGORY  \$5,000 - \$9,999  \$25,000OR MORE

### LIABILITIES OF BUSINESS ASSOCIATIONS

PART 11C

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Describe all liabilities of each corporation, firm, partnership, limited partnership, limited liability partnership, professional corporation, professional association, joint venture, or other business association in which you, your spouse, or a dependent child held, acquired, or sold 50 percent or more of the outstanding ownership and indicate the category of the amount of the assets. For more information, see FORM PFS--INSTRUCTION GUIDE.

When reporting information about a dependent child's activity, indicate the child about whom you are reporting by providing the number under which

		,	, , , , , , , , , , , , , , , , , , , ,	
BUSINESS ASSOCIATION	W Kenneth Paxton Jr PL	X (Check If Fil		
BUSINESS TYPE	Other Business Associat	ion		
HELD, ACQUIRED, OR SOLD BY	FILER	X SPOUSE	DEPENDENT CHILD _	
LIABILITIES	DESCR	RIPTION	CATE    X LESS THAN \$5,000     \$10,000 - \$24,999	EGORY \$5,000 - \$9,999 \$25,000OR MORE
BUSINESS ASSOCIATION	TAMKA LLC			
BUSINESS TYPE	Other Business Associati	ion		
HELD, ACQUIRED, OR SOLD BY	X FILER	SPOUSE	DEPENDENT CHILD _	
LIABILITIES	none		X LESS THAN \$5,000 \$10,000 - \$24,999	\$5,000 - \$9,999
	BUSINESS TYPE  HELD, ACQUIRED, OR SOLD BY  LIABILITIES  BUSINESS TYPE  BUSINESS ASSOCIATION	BUSINESS TYPE  BUSINESS TYPE  Other Business Associate  HELD, ACQUIRED, OR SOLD BY  LIABILITIES  BUSINESS ASSOCIATION  TAMKA LLC  BUSINESS ASSOCIATION  TAMKA LLC  BUSINESS TYPE  Other Business Associate  Other Business Associate  TAMKA LLC  BUSINESS TYPE  Other Business Associate  HELD, ACQUIRED, OR SOLD BY  IX FILER  DESCENDENCE  DESCENDENC	BUSINESS TYPE  BUSINESS TYPE  Other Business Association  HELD, ACQUIRED, OR SOLD BY  LIABILITIES  DESCRIPTION  DESCRIPTION  TAMKA LLC  BUSINESS TYPE  Other Business Association  NAME AN X (Check If Fill X SPOUSE  DESCRIPTION  TAMKA LLC  BUSINESS TYPE  Other Business Association  HELD, ACQUIRED, OR SOLD BY  TAMKA LLC  DESCRIPTION  TAMKA LLC  BUSINESS TYPE  Other Business Association  HELD, ACQUIRED, OR SOLD BY  X FILER SPOUSE  LIABILITIES  DESCRIPTION  none	BUSINESS TYPE  Other Business Association  HELD, ACQUIRED, OR SOLD BY  LIABILITIES  BUSINESS TYPE  Other Business Association  DESCRIPTION  TAMKA LLC  TAMKA LLC  DESCRIPTION  TAMKA LLC  DESCRIPTION  TAMKA LLC  TAMKA LLC  TAMKA LLC  DESCRIPTION  TAMKA LLC  TA

#### **BOARDS AND EXECUTIVE POSITIONS**

**PART 12** 

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

List all boards of directors of which you, your spouse, or a dependent child are a member and all executive positions you, your spouse, or a dependent child hold in corporations, firms, partnerships, limited partnerships, limited liability partnerships, professional corporations, professional associations, joint ventures, other business associations, or proprietorships, stating the name of the organization and the position held. For more information, see FORM PFS--INSTRUCTION GUIDE.

1	ORGANIZATION	RSKA Holdings LLC		
2	POSITION HELD	President		
3	POSITION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD
	ORGANIZATION	TAMKA LLC		
	POSITION HELD	President		
	POSITION HELD BY	X FILER	SPOUSE	DEPENDENT CHILD
	ORGANIZATION	W. Kenneth Paxton, Jr. F	PLLC	
	POSITION HELD	President		
	POSITION HELD BY	FILER	X SPOUSE	DEPENDENT CHILD
ı				

#### EXPENSES ACCEPTED UNDER HONORARIUM EXCEPTION

**PART 13** 

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, and DO NOT include this page in the report.

Identify any person who provided you with necessary transportation, meals, or lodging, as permitted under section 36.07(b) of the Penal Code, in connection with a conference or similar event in which you rendered services, such as addressing an audience or participating in a seminar, that were more than perfunctory. Also provide the amount of the expenditures on transportation, meals, or lodging. You are not required to include items you have already reported as political contributions on a campaign finance report, or expenditures required to be reported by a lobbyist under the lobby law (chapter 305 of the Government Code). For more information, see FORM PFS--INSTRUCTION GUIDE.

1 PROVIDER	NAME AND ADDRESS
	Rule of Law Defense Fund
	1747 Pennsylvania Ave NW Ste 800
	Washington, DC 20006
2 AMOUNT	\$872.00
PROVIDER	NAME AND ADDRESS
	Alliance Defending Freedom
	15100 N 90th Street
	Scottsdale, AZ 85260
AMOUNT	\$816.98
PROVIDER	NAME AND ADDRESS
	Republican Attorneys General Association
	1747 Pennsylvania Ave NW
	Suite 800
	Washington, DC 20006
	g.c, 2 0 2000
AMOUNT	\$1,616.12

### PERSONAL FINANCIAL STATEMENT

#### PARTS MARKED "NOT APPLICABLE" BY FILER

FORM PFS
COVER SHEET
PAGE 2

On this page, indicate any Parts of Form PFS that are not applicable to you. If you do not place a check in a box, then pages for that Part must be included in the report. If you place a check in a box, do NOT include pages for that Part in the report.

6	PAR	RTS NOT APPLICABLE TO FILER		
		N/A Part 1A - Sources of Occupational Income		
	Χ	N/A Part 1B - Retainers		
		N/A Part 2 - Stock		
	X	N/A Part 3 - Bonds, Notes & Other Commercial Paper		
		N/A Part 4 - Mutual Funds		
		N/A Part 5 - Income from Interest, Dividends, Royalties & Rents		
		N/A Part 6 - Personal Notes and Lease Agreements		
		N/A Part 7A - Interests in Real Property		
		N/A Part 7B - Interests in Business Entities		
		N/A Part 8 - Gifts		
	X	N/A Part 9 - Trust Income		
		N/A Part 10A - Blind Trusts		
		N/A Part 10B - Trustee Statement		
		N/A Part 11A - Business Associations		
		N/A Part 11B - Assets of Business Associations		
		N/A Part 11C - Liabilities of Business Associations		
		N/A Part 12 - Boards and Executive Positions		
		N/A Part 13 - Expenses Accepted Under Honorarium Exception		
	Χ	N/A Part 14 - Interest in Business in Common with Lobbyist		
	Χ	N/A Part 15 - Fees Received for Services Rendered to a Lobbyist or Lobbyist's Employer		
	Χ	N/A Part 16 - Representation by Legislator Before State Agency		
	Χ	N/A Part 17 - Benefits Derived from Functions Honoring Public Servant		
	Χ	N/A Part 18 - Legislative Continuances		
	Χ	N/A Part 19 - Contracts with Governmental Entity		
	Χ	N/A Part 20 - Bond Counsel Services Provided by a Legislator		

rerification page on a personal statement filed electroni dual required to file the personal financial statement.	ied. Without proper verification, the statement is not considered filed.
	with the Texas Ethics Commission must have the electronic signature of the
rerification page on a personal financial statement filed individual required to file the personal financial statem in authorized by law to administer oaths and affirmation	with an authority other than the Texas Ethics Commission must have the signatulent as wells as the signature and stamp or seal of office of a notary public or others.
	I swear, or affirm, under penalty of perjury, that this financial statement covers calendar year ending December 31, 2018, and is true and correct
	and includes all information required to be reported by me under chapter 572 of the Government Code.
	The Honorable Angela Paxton
	Signature of Filer
SIX NOTARY STAMP / SEAL ABOVE	
	, this the day
, 20, to certify which, w	nuress my nanu anu seai oi oince.
signature of officer administering oath Printed	name of officer administering oath Title of officer administering oath

### TRUSTEE STATEMENT

PART 10B

If the requested information is not applicable, indicate that on Page 2 of the Cover Sheet, **and do NOT include this page in the report.** 

An individual who is required to identify a blind trust on Part 10A of the Personal Financial Statement must submit a statement signed by the trustee of each blind trust listed on Part 10A. The portions of section 572.023 of the Government Code that relate to blind trusts are listed below.

1	NAME OF TRUST	The Esther Blind Trust
2	TRUSTEE NAME	Loper III, Charles A.
3	FILER ON WHOSE BEHALF STATEMENT IS BEING FILED	Angela Paxton

**4** TRUSTEE STATEMENT

I affirm, under penalty of perjury, that I have not revealed any information to the beneficiary of this trust except information that may be disclosed under section 572.023 (b)(8) of the Government Code and that to the best of my knowledge, the trust complies with section 572.023 of the Government Code.

Trustee Signature

#### § 572.023. Contents of Financial Statement in General

- (b) The account of financial activity consists of:
  - (8) identification of the source and the category of the amount of all income received as beneficiary of a trust, other than a blind trust that complies with Subsection (c), and identification of each trust asset, if known to the beneficiary, from which income was received by the beneficiary in excess of \$500;
  - (14) identification of each blind trust that complies with Subsection (c), including:
    - (A) the category of the fair market value of the trust;
    - (B) the date the trust was created;
    - (C) the name and address of the trustee; and
    - (D) a statement signed by the trustee, under penalty of perjury, stating that:
      - (i) the trustee has not revealed any information to the individual, except information that may be disclosed under Subdivision (8); and
      - (ii) to the best of the trustee's knowledge, the trust complies with this section.
- (c) For purposes of Subsections (b)(8) and (14), a blind trust is a trust as to which:
  - (1) the trustee:
    - (A) is a disinterested party;
    - (B) is not the individual;
    - (C) is not required to register as a lobbyist under Chapter 305;
    - (D) is not a public officer or public employee; and
    - (E) was not appointed to public office by the individual or by a public officer or public employee the individual supervises; and
  - (2) the trustee has complete discretion to manage the trust, including the power to dispose of and acquire trust assets without consulting or notifying the individual.
- (d) If a blind trust under Subsection (c) is revoked while the individual is subject to this subchapter, the individual must file an amendment to the individual's most recent financial statement, disclosing the date of revocation and the previously unreported value by category of each asset and the income derived from each asset.